

In the Specification

Please replace paragraph 7, at page 5, with the following rewritten paragraph:

B' FIG. 6 illustrates a schematic side view of a long catheter for use in preparing subchondral recesses and implanting osteochondral plugs, representing an embodiment of the invention.

Please replace paragraph 6 on page 9 with the following rewritten paragraph:

B2 The irrigating system involves a fluid (irrigant) source (typically two liter bags of normal or isotonic saline), connecting tubing to include tubing clamps for mechanically inhibiting and controlling the flow of the irrigating solution, the percutaneous catheter for insertion into the joint space to which the connecting tubing is attached providing the portal for irrigant supply, and a second portal or outflow port allowing irrigating fluid to exit the joint capsule which may have an extension tube to direct the outflow of the irrigant away from the operator.

Please replace the paragraph 1 on page 10 with the following rewritten paragraph:

B3 Either (or both) of these catheters may be incorporated into a catheter system allowing the introduction of a "scope" (rod lens apparatus for viewing the interior of the joint space) or the introduction of all manner of interventional tools, to include probes cutters electrosurgical and electrothermal instruments. Some surgeons utilize a pump system that sense intra-articular pressure and maintains that pressure to insure distraction of the joint and adequate hemostasis. Otherwise, the intra-articular (joint capsule) pressure is generated by elevating the solution bags above the level of the patient making use of a simple gravity supply.

[Please replace the paragraphs starting at paragraph 1, page 11, with the following rewritten paragraphs:

In the first instrument approach, the invention includes exchangeable catheter type devices. In this case, separate devices perform either the preparation function (e.g., drill the recess) or the delivery function (e.g., implant the prosthesis).

B4 The exchangeable instruments for recess preparation can include a long cannula and a drill. The long catheter can be approximately 20 cm long with an internal diameter of approximately 3 mm. The long catheter is inserted into the blunt trocar and the drill is inserted into the long catheter. The drill needs to reach the subchondral bleeding bed. The drill can include a shaft of flexible wire coupled to a rigid tip. The flexible wire should extend beyond the proximal end of the long catheter. The drill can have a rigid tip of appropriate length (e.g., approximately 5 mm to approximately 15 mm) with a diameter of approximately 3 mm.

The exchangeable instruments for implantation can include a flexible catheter serially loaded with several, for example three, substrates. The flexible catheter is inserted into the blunt trocar. The flexible catheter can utilize a pressure flow mechanism to press-fit the plugs into the recesses that are located in the prepared bed.

[Please replace paragraph 5 on page 11 with the following rewritten paragraph:

B5 Referring to FIG. 6, a flexible catheter 600 is depicted. The flexible catheter 600 has a proximal end 610 and a distal end 620.

[Please replace paragraph 3, on page 12 with the following rewritten paragraph:

B6 However, the use of exchangeable instruments requires the physician to alternately insert the two different instruments via the trocar and catheter as described above. This exchange of instruments requires time and effort. To save time, the physician can drill and plurality of recesses and then switch instruments to implant a corresponding plurality of plugs. This has the drawback of requiring the physician to realign the implantation